

ued to seem as difficult as unraveling the Gordian knot, despite enormous efforts to create community-based mental health systems throughout the industrialized world. Even though large state hospitals have been closed in Italy and downsized in the United Kingdom and the United States, individuals with long-term mental illness continue to suffer because of a lack of accessible and meaningful work opportunities in the community, and they continue to face significant basic survival barriers due to financial difficulties and stigma. In recent years, there has been a large volume of new literature on supported employment and housing in the community, but not much attention is paid to the overwhelming barriers confronting persons with mental disorders who have little energy available for problem solving on their own, due to the effects of their illnesses. In their new book, Julian Leff and Richard Warner face head on the deleterious effects of social discrimination and stigma, which prevent opportunities from emerging for these unfortunate individuals.

In Part One, Dr. Leff covers the origins of this stigma in all of its various forms, including poverty, institutionalization, and public fear and discrimination. He connects the course and features of severe mental disorders with the community's discriminatory practices and social disadvantages encountered by unemployed former hospital patients. The old institutions were at least able to provide an available home and activity center for such individuals. The closing of hospitals in the United States, Italy, and Britain left many with no place to call home. I personally remember 25 years ago when I spent several months in England on sabbatical, I asked a patient in a long-stay hospital there why she seemed so satisfied with the chilly, tatty, rundown hospital ward with no privacy she was stuck in. Her reply was, "The Queen has her castles, and I have mine." Unfortunately for this apparently happy woman, those cold, old psychiatric "castles" began to close shortly after our conversation.

In Part 2, Dr. Warner presents his theories on various ways to overcome obstacles to employment for discharged patients, beginning with a rationale for work and its effects on self-esteem and uncovering some connections between unemployment rates and vocational services. He shows us how low unemployment rates are associated with more social recovery, and the opposite is true during periods of economic recession. He also reviews the literature on transitional and supported employment and provides us with a manual on how to set up work cooperatives run by consumers for consumers. He reminds us of the movement in recent times to hire consumers in the mental health work force as case manager aides, as therapists, as community educators, etc. He informs us about innovative schemes such as consumer run housing, businesses, and pharmacies that keep the cost of drugs down. The final chapter on inclusion and empowerment shows us how the consumer movement itself, along with consumer operated drop-in centers and clubhouses, provides individuals with long-term mental illness that missing sense of community that used to exist in the old asylums and creates a certain human substrate that leads ultimately to recovery.

I would recommend this little book to academic training programs in psychiatry, community psychiatry, and social work for those seeking the bright side of work with persons with serious mental illness, as well as community mental health authorities and programs looking for the best in cur-

rent practice for integrating mentally ill persons back into their communities.

DAVID CUTLER, M.D.
Portland, Ore.

Multicultural Understanding of Child and Adolescent Psychopathology: Implications for Mental Health Assessment, by Thomas M. Achenbach and Leslie A. Rescorla. New York, Guilford Press, 2006, 322 pp., \$40.00.

Our assessment, operationalization, and understanding of child and adolescent psychopathology and of adaptive and maladaptive functioning have been developing very slowly. As the authors of this volume point out, "over the past few decades, efforts have become more systematic to identify and help children whose behavioral and emotional problems impair their functioning" (p. 1). This has been happening mostly in the more economically developed Western culture(s). Nevertheless, a full understanding of child/adolescent behavioral and emotional problems and psychopathology in the era of globalization should include an understanding of child and adolescent psychopathology from all kinds of cultures. This effort requires multicultural research on children's problems. In their book, Thomas Achenbach and Leslie Rescorla, well known and well published child psychology and psychopathology researchers, make a strong case for conducting multicultural research of child and adolescent psychopathology, summarize for us what has been done so far, and what instruments have been and could be used in this type of research.

The authors discuss the reasons for multicultural research on children's problems first. They warn us about the cultural dichotomies that interfere with our understanding of the increasing interconnections between cultures, such as "the West versus the rest" dichotomy or the "individualism versus collectivism dichotomy." They also discuss the various viewpoints on multicultural research, such as the emic (from inside a particular cultural system) and etic (via standardized methods that are applicable to multiple cultures). The next two chapters present details of the empirically-based ("bottom up") and diagnostically-based ("top down") approaches to psychopathology.

The following three chapters present multicultural research on empirically-based scale scores, correlates of scale scores, and patterns of problems. In another two chapters, the text continues with the discussion of the multicultural findings on the prevalence of diagnostically-based disorders and on the correlates and comorbidity of diagnostically-based disorders. The subsequent comparison of these two approaches points out the much lower test-retest reliability of diagnoses than of empirically-based scales. The final two chapters review the methodological and conceptual challenges posed by multicultural research on children's problems and the contribution of multicultural research to understanding, assessing, preventing, and treating child psychopathology. The authors propose that "multicultural findings on relations between risk factors and psychopathology suggest targets for prevention that are relevant to many cultural contexts" (p. 282).

This is an interesting, thought provoking, well referenced, complex, and complicated book. It synthesizes and integrates an enormous amount of information on multicultural assessment of child and adolescent psychopathology, material from

hundreds of studies using various well known and lesser known scales and questionnaires. It proposes new ways to understand child psychopathology. Those interested in child and adolescent psychopathology and developmental psychology research will definitely find it interesting and useful. However, this is, in a way, a very "technical" and specialized volume, which may not necessarily appeal to the general readership.

RICHARD BALON, M.D.
Detroit, Mich.

Counseling and Psychotherapy Essentials: Integrating Theories, Skills, and Practices, by Glenn E. Good and Bernard D. Beitman, New York, W.W. Norton, 2006, 384 pp., \$49.95.

Although the aims of effective and compassionate patient care are consistently held in common, the range of approaches, schools, and theories of psychotherapeutic practice can be daunting to even the most seasoned of practitioners. The sheer variety of methodological approaches and the lexical commitments that they presuppose can often obscure as much as inform our outcomes. With the needs of actual clinical practice consistently in mind, the authors of this textbook present a pragmatic, synthetic approach to psychotherapy that does not dilute the challenges we face both in the variety of our patients' particular life narratives and the conceptual maps that can be of use in their care. To this daunting task, the authors bring distinctive and needed complementary perspectives and experiences: Glenn E. Good is a professor of education who has written a handbook of psychotherapy and counseling, and Bernard D. Beitman is a professor of psychiatry who has written on bridging the pharmacology/psychotherapy divide. These collaborative voices enhance and are consonant with the larger integrative psychotherapeutic aims of the textbook.

The book's structure is conducive to its larger aims of integration by beginning with theoretical foundations and then sharpening its focus to practical clinical issues. Section I,

"Foundations of Counseling and Psychotherapy," provides an abstract—yet accessible—framework to the reader by summarizing a number of the main approaches in the field: psychodynamic, behavioral, cognitive, humanistic, multicultural, and systemic. Section II, "Components of Effective Counseling and Psychotherapy," provides the reader with insights about the basic features of successful and competent office practice, including guidance on therapeutic communication, working alliances, identifying patterns and their treatment, strategies for facilitating change, resolving resistance, negotiating transference and countertransference, and termination. Finally, Section III, "Higher Incidence Concerns and Effective Treatments," addresses specific high-yield issues for clinicians, such as depression, suicide, anxiety, substance abuse, and couples, family, and marital therapy.

The authors have distilled a tremendous amount of material and clinical literature germane to psychotherapy and counseling. Throughout, they write in the tradition of the biopsychosocial model that is the foundation for American psychiatric practice, and while avoiding jargon, they also manage to avoid facile reductionism. Readers interested in the historical development of the approaches to the mind described here can supplement their readings by turning to such classics as Leston Havens's *Approaches to the Mind* (1).

The last chapter, "Medications, Therapy, and the Neural Circuitry of the Brain," tackles the rapidly emerging field of psychosocial neurobiology. Readers interested in supplementing the discussion offered in this chapter may well want to turn to such fundamental works as Arnold Modell's *Imagination and the Meaningful Brain* (2).

References

1. Havens LL: *Approaches to the Mind: Movement of the Psychiatric Schools From Sects Toward Science*. Cambridge, Mass, Harvard University Press, 1987
2. Modell, Arnold H: *Imagination and the Meaningful Brain*. Cambridge, Mass, MIT Press, 2003

OMAR SULTAN HAQUE, M.T.S.
HAROLD J. BURSZTAJN, M.D.
Cambridge, Mass.

Reprints are not available; however, Book Forum reviews can be downloaded at <http://ajp.psychiatryonline.org>.